24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
KEEP THE PROMISE I	C C00575373	
	O totale	
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee CAMBRIDGE ANALYTICA LLC	Date of Public Distribution/Dissemination	
Mailing Address 8383 WILSHIRE BLVD	12 21 2015	
STE 1000	Amount	
City State	Zip Code 4938.92	
BEVERLY HILLS CA	90211 Transaction ID : SE.4339 Date of Disbursement or Obligation	
Purpose of Expenditure MEDIA	Category/ Type 12 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate	Support Office Sought: House District: 00	
RAFAEL EDWARD 'TED' CRUZ	Oppose President Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶	
Full Name of Payee CAMBRIDGE ANALYTICA LLC	Date of Public Distribution/Dissemination	
Mailing Address 8383 WILSHIRE BLVD	12 21 2013	
STE 1000	Amount	
City State	Zip Code 6297.06	
BEVERLY HILLS CA	90211 Transaction ID : SE.4347 Date of Disbursement or Obligation	
Purpose of Expenditure MEDIA	Category/ May / Dad / Yayay	
	Type 12 10 2015	
Name of Federal Candidate	Support Office Sought: House District: 00	
RAFAEL EDWARD 'TED' CRUZ	Oppose President Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought	0.00 Disbursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	11235.98	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	lectronically Filed] Date 12 23 2015	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼		
KEEP THE PROMISE I	C C00575373	
	U	
Check if 24-hour report X 48-hour report New report Amends report	i filed on Man / Dad / Yayayay	
Full Name of Payee	Date of Public Distribution/Dissemination	
NOSTROMO FILMS INC.	12 21 2015	
Mailing Address 709 LORRAINE DRIVE	Amount	
City State Zip Code	6250.00	
SOUTHLAKE TX 76092	Transaction ID : SE.4343	
Purpose of Expenditure	Date of Disbursement or Obligation	
MEDIA Category/	12 10 7 2015	
	Office Sought: House District: 00	
RAFAEL EDWARD 'TED' CRUZ Oppose	President Senate State: IA	
	Disbursement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
NOSTROMO FILMS INC.	12 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 709 LORRAINE DRIVE		
	Amount	
City State Zip Code	6250.00	
SOUTHLAKE TX 76092	Transaction ID: SE.4345 Date of Disbursement or Obligation	
Purpose of Expenditure Category/	M M / D D / Y Y Y Y	
Type	12 10 2015	
	Office Sought: House District: 00	
RAFAEL EDWARD 'TED' CRUZ Oppose	President Senate State: SC	
Calorida Tour to Bato	Disbursement For: Primary General	
Per Election for Office Sought	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	12500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	23735.98	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
JACQUELYN JAMES [Electronically Filed] Date	12 23 2015	
Signature		